

W1
11/1/99
20

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		10/1/99
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	32	10/21
FORMALITY REVIEW		65955	10/29

INDEX OF CLAIMS

- ✓ Rejected
- Allowed
- (Through numeral) Canceled
- Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
Final Original	
1	6/10/02
2	3/18/02
3	12/12/02
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Claim	Date
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Claim	Date
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